

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Marco Rubio for President

A. Full Name (Last, First, Middle Initial)

MR. ANDREW J. HERENSTEIN

Mailing Address 3 DOGWOOD LANE

City

LAWRENCE

State

NY

Zip Code

11559-1820

FEC ID number of contributing
federal political committee.

C

Name of Employer

QUADRANGLE

Occupation

MANAGING PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.754667

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)

MR. JACK HERICK

Mailing Address 2211 GREENVIEW COVE DR.

City

WELLINGTON

State

FL

Zip Code

33414-7756

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST
EFFORTS

Occupation

INFORMATION REQUESTED PER BEST
EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

Transaction ID : SA17.753925

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

150.00

C. Full Name (Last, First, Middle Initial)

DEBORAH A. HERMAN

Mailing Address 3111 PONCE DE LEON BLVD

City

CORAL GABLES

State

FL

Zip Code

33134-6816

FEC ID number of contributing
federal political committee.

C

Name of Employer

FABRIC INNOVATIONS

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : SA17.735155

Date of Receipt

M M / D D / Y Y Y Y
04 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

300.00

Subtotal Of Receipts This Page (optional).....

3150.00

Total This Period (last page this line number only)